

U.S. DEPARTMENT OF HOMELAND SECURITY

ELEVATION CERTIFICATE

Federal Emergency Management Agency

OMB No. 1660-0008 Expires March 31, 2012

Important: Read the instructions on pages 1-9. National Flood Insurance Program SECTION A - PROPERTY INFORMATION For Insurance Company Use: A1. Building Owner's Name Policy Number A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Company NAIC Number ZIP Code A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) A5. Latitude/Longitude: Lat. Horizontal Datum: NAD 1927 NAD 1983 Long. A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number A8. For a building with a crawlspace or enclosure(s): A9. For a building with an attached garage: a) Square footage of crawlspace or enclosure(s) a) Square footage of attached garage sa ft sa ft b) No. of permanent flood openings in the crawlspace or b) No. of permanent flood openings in the attached garage enclosure(s) within 1.0 foot above adjacent grade within 1.0 foot above adjacent grade Total net area of flood openings in A8.b Total net area of flood openings in A9.b sa in sq in Engineered flood openings? Yes Engineered flood openings? Yes No SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B2. County Name B3. State B4. Map/Panel Number B5. Suffix B6. FIRM Index B7. FIRM Panel B8. Flood B9. Base Flood Elevation(s) (Zone Date Effective/Revised Date Zone(s) AO, use base flood depth) B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. FIS Profile FIRM Community Determined Other (Describe) B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☐ No CBRS OPA Designation Date_ SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: Construction Drawings* ■ Building Under Construction* Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. Use the same datum as the BFE. Benchmark Utilized 3P-15 Vertical Datum NAVD 88 Conversion/Comments NGS Check the measurement used. meters (Puerto Rico only) Top of bottom floor (including basement, crawlspace, or enclosure floor) a) feet Top of the next higher floor feet meters (Puerto Rico only) b) Bottom of the lowest horizontal structural member (V Zones only) feet meters (Puerto Rico only) c) Attached garage (top of slab) feet meters (Puerto Rico only) d) Lowest elevation of machinery or equipment servicing the building meters (Puerto Rico only) e) feet (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG) feet meters (Puerto Rico only) g) Highest adjacent (finished) grade next to building (HAG) feet meters (Puerto Rico only) Lowest adjacent grade at lowest elevation of deck or stairs, including feet meters (Puerto Rico only) structural support SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a No licensed land surveyor? Yes Certifier's Name License Number Company Name Title Address ZIP Code State Signature Date Telephone